## **REMARKS**

This Supplemental Preliminary Amendment supplements the Preliminary Amendment dated July 9, 2004, which incorrectly identified Claims 1 to 12 as pending.

Claim 13 is the sole claim in the application, and the cancellation of Claims 1 to 12 is hereby confirmed. Reconsideration and further examination are respectfully requested.

Applicant's undersigned attorney may be reached in our Costa Mesa,

California office at (714) 540-8700. All correspondence should continue to be directed to

our below-listed address.

Respectfully submitted,

Michael K. O'Neill Attorney for Applicant

Registration No.: 32,622

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FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-2200 Facsimile: (212) 218-2200

CA\_MAIN 93946v1

In re Application of:

Docket No. 03560.002342.2

NAOKI NISHIMURA

Application No.: 10/689,717

Examiner: Nguyen, Tan

Filed: October 22, 2003

Group Art Unit: 2818

For: MAGNETIC THIN FILM ELEMENT, MEMORY ELEMENT USING THE SAME, AND METHOD

FOR RECORDING AND REPRODUCING

USING THE MEMORY ELEMENT

Date: July 19, 2004

THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Preliminary Amendment in the above-identified application.

| X | No additional fcc is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 1	MINUS	** 20	= 0	x \$9 \$18	.00
INDEP. CLAIMS	* 1	MINUS	*** 3	= 0	x \$43 \$86	.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					-00	

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

## Certificate of Transmission

Name of person signing certificate

Page 1 of 2

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant Michael K. O'Neill

Registration No.: 32,622

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